

GENERAL DISTRIBUTION

WEST VIRGINIA
DIVISION OF CORRECTIONS
& REHABILITATION

NUMBER: 453.05

EFFECTIVE DATE: 17 April 2025

SUBJECT: RESIDENTIAL SUBSTANCE
ABUSE TREATMENT (RSAT)

POLICY DIRECTIVE

PURPOSE:

To provide policy establishing the guidelines for Residential Substance Abuse Treatment (RSAT) Units as intensive, residential programs to aid in the recovery and relapse prevention for inmates with chronic substance abuse treatment needs.

REFERENCE:

ACA Expected Practices 5-ACI-5E-11, 5-ACI-5E-12, 5-ACI-5E-13, 5-ACI-5E-14, and 5-ACI-5E-15.

RESPONSIBILITY:

Superintendents of facilities with Residential Substance Abuse Treatment (RSAT) Units are responsible for enacting facility-specific Operational Procedures and ensuring the requirements of this Policy Directive are included in applicable Post Orders.

CANCELLATION:

Any previous written instruction on the subject including DCR Policy Directive 453.05, dated 03 April 2024.

APPLICABILITY:

All adult facilities within the Division of Corrections and Rehabilitation (DCR) that have Residential Substance Abuse Treatment (RSAT) Units. This Policy is available for general distribution and is to be made available for inmate review upon the effective date.

DEFINITIONS:

Case Supervisor: The DCR staff member assigned by the Superintendent or Unit Manager to manage the caseload of a particular inmate or group of inmates (e.g.,

Corrections Case Manager, Reentry Coordinator, Corrections Program Specialist, or Correctional Counselor).

Therapeutic Community: A participative, group-based approach to long-term residential treatment for substance use disorders.

POLICY:

- I. Residential Substance Abuse Treatment (RSAT) Units are provided within designated Division of Corrections and Rehabilitation (DCR) facilities to serve those inmates exhibiting a high level of need for intervention plans. RSAT units are the primary treatment units within the structure of long-term, residential intensive treatment program designed for inmates who have histories of drug/alcohol abuse and/or addiction. Generally, inmates are engaged in RSAT programming for a period of six (6) to nine (9) months but may be housed in an RSAT unit up to twelve (12) months. These units are rooted in values driven; principle-centered techniques related to healthy living.
- II. RSAT units will adhere to therapeutic community standards as disseminated in writing by the Director of Offender Services or designee.
 - A. RSAT units will undergo annual reviews by the Director of Offender Services/designee to ensure compliance with the RSAT standards.
 - B. RSAT standards will be reviewed and updated in a collaborative manner and on an annual basis by a review committee established by the Director of Offender Services/designee.
- III. As part of the orientation to RSAT units, each inmate will be provided with the *Residential Substance Use Disorder Treatment Handbook* that includes general information and basic procedures of the unit, rules and regulations, and a summary of what is expected.
- IV. RSAT programming is based on the principles of cognitive behavioral intervention and relapse prevention and includes curriculum based (instructive) programs as approved by the Director of Offender Services/designee and will incorporate, at a minimum, the following daily activities into the unit schedule:
 - A. Morning Stress Reduction Activity
 - B. Evening Wrap-Up/Planning Meeting
 - C. Weekend wrap-up.
 - D. Curriculum will include evidence-based programs utilizing Hazelden "A New Direction/Substance Abuse Treatment Programming" and The Change Companies® "Financial Literacy and Changing Family Dynamics."

- E. Confrontation, Process, Static, and Awareness groups, according to schedule, one per day.
- F. Other fellowship activities.
- V. Isolation of the RSAT unit population from the general population is preferred.
 - A. In cases where complete isolation cannot be achieved, contact between RSAT unit inmates and general population inmates should be minimized and appropriately supervised.
 - B. Substance abuse programming for RSAT unit inmates will be provided separately from general population inmates.
 - C. RSAT unit inmates may attend other programs with the general population (e.g., TASC, crime specific programs, etc.) if it does not conflict with the RSAT unit programming or commitments and is approved by the RSAT Unit Team prior to the inmate's enrollment in the class/program.
- VI. RSAT units will operate on staff to inmate ratio of 1:16.
 - A. It is recommended that RSAT units refrain from placing unit-assigned staff, to include correctional officers, on regular rotation cycles due to the specialized nature of the unit and treatment needs of the inmates.
 - B. Staff working within or having direct contact/supervision of an RSAT unit will participate in general training.
 - C. At facilities with RSAT units, the following staff are required to attend Community Building Training as entry-level training working with an RSAT population.
 - 1. All staff assigned to work within the housing unit.
 - 2. All Shift Commanders.
 - 3. Assistant Superintendents of Programs.
 - 4. Superintendents.
 - 5. Other Deputy/Assistant Superintendents, department heads, mid-level managers, and/or unit managers, at the discretion of the Superintendent.
 - D. All non-uniform programs staff working within the RSAT unit will be required to attend Skills Building Training, Professional Development and/or other specialized training as directed by the Assistant Superintendent of Programs and/or the Director of Offender Services/designee.

E. Unit Managers of RSAT units are responsible for management of the unit, while the Substance Abuse Therapist (SAT)/designee oversees the daily program operations of the unit including:

1. Serve as the primary responder to all issues that are directly related to community business.
2. Attend daily meetings with the peer leaders, including all group discussions.
3. Ensure the program schedule is followed.
4. To the extent possible, peer leaders will be assigned by the SAT/designee within the unit to assist with operation of the unit.
5. Complete progress reports for each inmate for each phase completed.

VII. RSAT programming will progress through a structured phase system to monitor and assess inmate progress while within the unit. Phases will incorporate, at a minimum, the following:

A. Phase One (I) - Orientation: Phase I is the initial introduction to the therapeutic community model of treatment within the DCR. The community is the beginning of the longitudinal continuum of recovery that leads from the correctional system to free society following release. This phase is the introductory period to the community and healthy community lifestyle.

Mandatory Phase-Up Requirements:

High school diploma or enrolled in high school equivalency classes	Workbook 1 Intake and Orientation completed
Familiarity with RSAT unit, handbook and Help 4 WV Education	MOUD education
Measurement Tool Sheet completed	Phase Up criteria completed

Phase Length: minimum of four (4) weeks

B. Phase Two (II) – Primary Treatment: Phase II is the period in which the inmate is immersed in the community lifestyle and begins to practice the behaviors, attitudes and values promoted by the community. Phase II is the longest phase of this treatment model and will address specific criminogenic risks and needs. The participant will examine the addictive and criminal behaviors that led to this lifestyle, while completing “Thinking Reports” to develop change. This phase consists of two (2) workbooks.

Mandatory Phase-Up Requirements:

Enroll in Changing Family Dynamics	Enroll in Financial Literacy
Measurement Tool Sheet completed	Workbook 2 Criminal and Addictive Thinking and Workbook 3 Alcohol and Other Drug Education completed
Phase Up criteria completed	

Phase length: minimum of nine (9) weeks

- C. Phase Three (III) – Intermediate Treatment: The goal of this phase is socialization through positive peer relations and teaching skills. An inmate who has been selected by staff and who has completed Phase II may be selected to serve as a peer leader. For programmatic purposes, peer leaders may constitute no more than 5% of the RSAT unit's population and must be transitioned from the unit within eighteen (18) months from the date enrolled in the program. This does not include peer leaders in Mentor Units.

Mandatory Phase-Up Requirements:

Workbook 4 Socialization completed	Measurement Tool Sheet completed
Phase Up criteria completed	

Phase Length: minimum of four (4) weeks

- D. Phase Four (IV) - Practicum: Phase IV is the period in which the inmate has an opportunity to live a healthy lifestyle with appropriate structure and demonstrate competency regarding community attitudes, behaviors, and values. Phase Four (IV) is designed to develop a relapse prevention plan that includes daily scheduling, crisis plans and other high-risk situations.

Mandatory Phase-Up Requirements:

Workbook 5 Relapse Prevention completed	Financial Literacy completed
Measurement Tool Sheets completed	Changing Family Dynamics completed
Phase Up criteria completed	

Phase length: minimum of four (4) weeks

- E. Phase Five (V) - Transition: Phase V focuses on maintaining the healthy lifestyle that the inmate has been living and preparing to transition into aftercare within the DCR. Phase V is the last phase of the program and is designed to finalize a release plan, address housing, education, employment, money management, transportation, and other essentials to maintaining a stable recovery. Every effort will be made to refrain

from placing inmates back into general population housing upon completion of RSAT programming.

Mandatory Requirements:

Workbook 6 Preparing for Release completed	Mentor Phase I's
Measurement Tool Sheets completed	Phase Up criteria completed

Phase Length: minimum of five (5) weeks

- VIII. When applicable each facility should have a Mentor Unit. The Mentor Unit has a dual purpose. It is a holding area for inmates waiting to enter the RSAT unit and an area to house RSAT graduates. The Mentor Unit should house RSAT graduates to avoid them returning to general population and to have an opportunity to provide positive influence on the inmates waiting to enter the RSAT unit. It also allows graduates to live in a less intensive treatment environment. However, this unit continues to operate according to therapeutic community standards. If it is not applicable, every attempt should be made to place all graduates in the same housing unit(s).
- A. Peer support groups will be held in this unit.
 - B. Morning stress reducer activities and evening meetings will be held Monday-Friday.
 - C. Any RSAT graduate who is placed in segregation should not be placed back into the Mentor Unit.
- IX. All RSAT units shall provide the following additional privileges for their participants. Additional privileges will be based on being **"earned"** by the inmates and not **"entitled."**
- A. The following list, although not inclusive, is designed to provide guidance for the types of additional privileges that may be utilized.
 - 1. Unit operated clothes washers and dryers (if applicable)
 - 2. Ordering take-out food (quarterly)
 - 3. Additional phone privileges
 - 4. Increased visitation opportunities
 - 5. Increased commissary spending limit
 - 6. Provision of unit library
 - 7. Additional recreation opportunities

8. Preference in mealtimes
 9. Large screen televisions in the dayrooms
 10. Permitting personal room décor
 11. Providing refrigerators or other kitchen appliances
 12. Other privileges not allowed for general population inmates with the Superintendent's approval.
- B. Inmates who have graduated from an RSAT unit and possess the same educational levels and qualifications for work as others applying for the same in-facility work assignment will be given preference over those who have not completed the program.
- C. Inmates who have graduated from an RSAT unit and meet all other criteria for transfer to a less secure facility will be placed at the top of the movement list.
- X. The risk/needs assessment administered during intake processing of each inmate committed for felony offense(s) and each returning parole violator determines the appropriateness for RSAT.
- A. When appropriate, the Case Supervisor will ensure a recommendation for RSAT, and a Resource Referral Form is entered on the Offender Information System (OIS). If the intake was completed at a facility with an RSAT unit, a copy of the completed Resource Referral Form will also be sent to the RSAT Unit Manager/designee.
- B. If there is not an RSAT unit at the facility where the intake was completed, the Director of Offender Services/designee will coordinate with the Director of Classification and Movement/designee to ensure the inmate is transferred to a facility with an RSAT unit if the inmate is within eighteen (18) months of potential release.
- C. Upon intra-agency transfers of felony committed inmates, their program needs will be reviewed within thirty (30) days and if recommended for RSAT, the Case Supervisor will ensure a Resource Referral Form is entered in OIS if not previously completed.
- XI. Upon referral of an inmate to an RSAT unit, a member of the RSAT Unit Team will meet with the inmate and review the Informed Consent/Refusal Form (**Attachment #1**). Should an inmate recommended for the RSAT unit refuse to participate, the Unit Team member will also remind the inmate of the benefits and additional privileges of placement in an RSAT unit.
- A. The Unit Team member meeting with the inmate will also provide information on the agency's Medications for Opioid Use Disorder (MOUD) program and refer the inmate to healthcare staff for evaluation.

- B. Inmates assessed for RSAT will be placed on the unit based on their Parole Eligibility Date (PED).
 - C. Inmates may be placed on a Mentor Unit or waitlisted until space is available on the RSAT unit.
- XII. Eligibility requirements for inmates to be assigned to a particular RSAT unit are based on the security/custody level of the facility where the unit is located. Inmates should be housed at the lowest possible security/custody unit.
- A. RSAT Units at Beckley Correctional Center & Jail (BCC&J), Charleston Correctional Center & Jail (CCC&J), and Parkersburg Correctional Center & Jail (PBCC&J) will serve inmates with classification/custody levels of I and II provided the inmate meets all other criteria for placement at these facilities.
 - B. Placement evaluation approval is required for an inmate to be placed in an RSAT Unit at a Community Corrections facility. Additionally, prior to transfer an inmate must obtain medical clearance from the transferring facility's medical department (**Attachment #2**).
- XIII. Inmates will be enrolled in the RSAT program no less than six (6) months and up to nine (9) months with approval of the Director of Offender Services/designee. However, they may be housed on the RSAT unit for up to twelve (12) months.
- A. Facilities will make every effort to place inmates in the RSAT unit near the end of their sentence. In cases where operational needs of the institution must be met, inmates may be placed in the unit more than twelve (12) months from their minimum release date.
 - B. Inmates enrolling in the RSAT unit are required to sign a Participation Contract (**Attachment #3**) outlining residency requirements.
 - C. An inmate may elect to withdraw from the unit voluntarily after enrollment, without threat of disciplinary action. In this case, an inmate requesting to withdraw will be required to stay an additional forty-eight (48) hours to two (2) weeks prior to being released from the unit, unless an earlier withdraw is deemed necessary by the Unit Team.
 - D. An inmate may be suspended from the unit, if after fully exhausting all therapeutic tools and methods of motivational enhancement have failed and staff perceives that the inmate's behavior or level of participation is negatively impacting the programming of other inmates living within the unit, with approval from the Director of Offender Services/designee unless found guilty of a Class I rule violation.
 - E. Each facility may **suspend** an inmate from the RSAT unit for a period up to thirty (30), then sixty (60) days. Any inmate suspended from the program will be required to wait

three (3) months after each suspension is complete before they are placed back on the waitlist. The decision to approve an inmate's request to return to the RSAT unit will be made by the Director of Offender Services/designee.

- F. An inmate may also be removed from the RSAT unit for up to ninety (90) days and be returned to the general population after all tools have failed and suspensions have been exhausted. The inmate will be reviewed at ninety (90) days to determine whether he/she is suitable to return to the RSAT unit.
- G. If an inmate is **not** suitable to return, the Unit Manager/designee shall submit a memorandum to the Director of Offender Services/designee explaining why the RSAT Unit Team believes the inmate should not be accepted back into the program. The Director of Offender Services/designee shall respond to the memorandum within five (5) working days.
- H. Each facility may refuse placement in the RSAT unit for any inmate with approval from the Director of Offender Services/designee. If an inmate has failed/taken the program four (4) or more times during his/her current incarceration a memorandum does not need to be submitted to the Director of Offender Services/designee.
- I. Inmates granted parole contingent upon completing RSAT may only be removed from the RSAT unit with approval of the Director of Offender Services/designee.
 - 1. The RSAT Unit Manager will submit a Recommendation to Remove (**Attachment #4**) with supporting documentation to the Superintendent/designee.
 - 2. The Superintendent/designee will submit the signed form to the Director of Offender Services/designee for approval.

XIV. Every RSAT inmate will hold a work assignment within the unit. RSAT inmates will not perform work assignments paid or unpaid, outside of the unit. (Inmates residing at Parkersburg Correctional Center & Jail, Charleston Correctional Center & Jail or Beckley Correctional Center & Jail will only be permitted to work pre-approved jobs outside the RSAT unit with approval from the unit team and Director of Offender Services/designee).

- A. Each inmate will be paid monthly for their work assignments within the unit. Such pay will be in the form of a stipend.

Phase I:	\$0.00
Phase II:	\$26.00
Phase III:	\$41.00
Phase IV:	\$56.00
Phase V & Peer Leaders	\$66.00

- B. Any inmate selected to be a Peer Leader before completing the program will receive the Peer Leader stipend pay, regardless of whether the inmate is Phase III or Phase IV.

- C. Pay may be suspended for disciplinary reasons, per the Unit Manager.
 - D. Unit Managers will be directly responsible under the authority of the Superintendent for ensuring that the stipend system is not abused by inmates and that all inmates are working within the unit and their phase, thus justifying their receipt of stipends.
- XV. Drug and alcohol testing by urinalysis, breathalyzer and/or by other proven reliable form of testing shall be completed on all inmates assigned to RSAT units on a quarterly basis and again upon completion of the RSAT program. Additional information on testing can be found in Policy Directives 308.03 and 308.06.
- XVI. **No** inmate living within an RSAT unit may have operational decision-making authority; nor shall any inmate have the authority to impose sanctions on another inmate.
- A. All Class I rule violations occurring within the RSAT unit population that affect the safety and security of the unit, staff, inmates, and/or the program will be sent to the Chief of Security/Chief Correctional Officer for appropriate disposition.
 - B. All Class II rule violations should be handled internally by the RSAT Unit Team, with only informational incident reports being completed, unless it is a Class II Violation deemed necessary due to the safety and security of the unit and approved by the Unit Manager.
 - C. All Class III rule violations should be handled internally by the Peer Leaders, with assistance from the SAT when necessary, with only informational reports being completed to the SAT, unless deemed necessary and approved by the Unit Manager.
- XVII. Each facility maintaining an aftercare *component* will continue to operate according to therapeutic community concepts and values. Services in an aftercare component will include:
- A. AA/NA meetings on voluntary basis after regular programming hours with secular alternative available.
 - B. Weekly journals.
 - C. Additional privileges may also be utilized as stipulated above.
- XVIII. Any inmate currently enrolled and/or successfully graduated from an RSAT unit is eligible for recovery coach assistance within the facility.
- A. The SAT is responsible for working with an inmate six (6) months prior to his or her anticipated parole/release date or RSAT completion date for aftercare assistance such as but not limited to recovery coach resources available to the inmate within the facility and in his/her community.

- B. The recovery coach must be an approved recovery coach through the DCR.
 - C. Once the recovery coach has been determined, the SAT is required to schedule a meeting via telephone or video conference between the inmate and his/her recovery coach to establish rapport prior to the inmate's release or upon completion of the RSAT program.
 - D. Additionally, the SAT is responsible for scheduling meetings between the recovery coach and RSAT graduates housed on a work release unit.
 - E. The SAT is responsible for ensuring a Recovery Services Pre-Release Screening (**Attachment #5**) is completed and forwarded to the Reentry Coordinator/designee to send to the supervising parole officer upon the inmate's release on parole supervision.
 - F. Aftercare follow-up contact with RSAT graduates is conducted by the SAT on the one (1) month, three (3) month, six (6) month, twelve (12) month, eighteen (18) month and two (2) year anniversary of their release to the community. This information is provided to the Director of Offender Services/designee to assist in tracking program success.
- XIX. When an inmate has successfully graduated from an RSAT unit and meets the eligibility requirements as outlined in Policy Directive 455.02, he/she will be assessed for aftercare placement in a work release unit.
- A. A list of those inmates who have been deemed acceptable (eligible) or not acceptable (ineligible) for transfer to one of the work release units, will be prepared monthly by the facility Movement Coordinator. He/she will coordinate a formal review.
 - B. These inmates must be able to seek and retain employment, with physical ability verified by medical personnel prior to transfer from an RSAT unit to a work release unit.
 - C. Selected inmates will be required to actively participate in all aftercare programs. Failure to do so may result in sanctions outlined in Policy Directive 455.02.
- XX. RSAT Unit staff shall be responsible for completing a memorandum to the Parole Board each time an inmate who has either withdrew, successfully graduated or is still participating in an RSAT unit is reviewed for parole consideration. **Attachment #6** provides a memorandum format which shall be customized to the particular inmate's program participation.
- XXI. The following RSAT documents will be uploaded to the inmate's record in OIS Document Management: certificates, consent/refusal forms, phase-up applications, and resource referral forms.

XXII. RSAT Unit Managers or designee will complete a Residential Facilities Monthly Reporting Form (**Attachment #7**) and send them to the Director of Offender Services/designee by the tenth (10th) of each following month.

ATTACHMENT(S):

- #1 Informed Consent/Refusal Form
- #2 RSAT Medical Clearance for Community Corrections Facilities
- #3 Participation Contract
- #4 Recommendation to Remove Offender with Contingent Parole
- #5 Recovery Services Pre-Release Screening (2 pages)
- #6 Participation in the RSAT Program Memo (to be printed on facility letterhead)
- #7 RSAT Unit: Residential Facilities Monthly Reporting Form (2 pages)

APPROVED SIGNATURE: William K. Marshall III 4/17/2025
William K. Marshall III, Commissioner Date

West Virginia Division of Corrections and Rehabilitation
Residential Substance Abuse Treatment Unit
INFORMED CONSENT/REFUSAL FORM

NAME _____ OID# _____ DATE _____

Residential Substance Abuse Treatment (RSAT) Programs are available throughout the West Virginia Division of Corrections and Rehabilitation to provide long-term, residential, intensive treatment to those offenders who have histories of drug/alcohol abuse and/or addiction. These programs operate on principles related to healthy living. Parent institutions manufacture an environment utilizing operational procedures that reflect the prosocial values found in healthy lifestyles free of substance abuse and crime. Problematic attitudes and behaviors will be addressed through experiencing a positive, healthier lifestyle which meets the needs of the individual, and the needs of those around him or her in an environment where honesty is safe to express, and where people share a commitment of common concern for one another's best interest. The Therapeutic Community (TC), as a method for treatment, offers several advantages over traditional correctional approaches. Education is certainly included within the method; however, the goal of the curriculum surpasses delivering information. Community members not only learn definitions of healthy values, but also are provided the opportunity to practice them daily. National research has shown that when TC programs are operated effectively, recidivism drops 20 - 30%. In addition to stopping drug use, the goal of treatment is to return the individual to productive functioning in the family, workplace, and the community.

REFUSAL:

I am aware that it has been recommended I participate in an RSAT program. I have been advised of the nature and content of the program, the benefits, and risks of the program. I understand that my refusal to participate will be reflected in my Case Management Plan, and that my classification score may be adversely affected by my refusal to participate. I have been made aware of the potential consequences if I refuse to accept participation in the program. At this time, I do not wish to participate in the program. I release and waive any claim, which I might have against the State of West Virginia or any of its agents or employees for any consequences, which may result from my refusal to participate in the program. I understand that if I change my mind, I may notify my unit team. I understand this is not a blanket refusal for ALL programs.

Inmate Signature

Date

After explanation of the RSAT program, I have given my permission, consent to the program recommended, and agree to participate in such program as space becomes available.

Inmate Signature

Date

Staff Signature

Date

West Virginia Division of Corrections and Rehabilitation

RSAT Medical Clearance for Community Corrections Facilities

Inmate's Name: _____ OID# _____

Facility: _____ Date: _____

- 1.) Is chronic care visit current? If yes, clear. If no, schedule clinic. Y___ N___
- 2.) Are there pending offsite appointments? If yes, do not clear. Y___ N___
- 3.) Are there pending follow-up tests in response to an abnormal test result? If yes, do not clear until test has been completed. Y___ N___
- 4.) Dental: Any complaint of toothache, scheduled extraction, or dentures pending? If yes, move to top of dental list and do not clear until complete, unless inmate signs refusal. Y___ N___
- 5.) Is the inmate currently prescribed any controlled substances (opiates, benzodiazepines, etc.)? If yes, do not clear unless the medication will be discontinued prior to transfer. Y___ N___
- 6.) Is the inmate participating in the Medications for Opioid Use Disorder (MOUD) Program? Y___ N___

Medical Staff's Signature _____

Approved: Yes___ No___

Pending: _____

**West Virginia Division of Corrections and Rehabilitation
Residential Substance Abuse Treatment Unit
Participation Contract**

I, _____, have chosen to participate in the _____
(Print Name) (Community Name)
Residential Substance Abuse Treatment (RSAT) Unit/Program at _____.
(Facility Name)

I am aware that _____ is a 12-month Residential Substance Abuse Treatment
(Community Name)
(RSAT) Program that provides long-term, intensive, residential treatment to those offenders who
have an addiction and/or histories of drug/alcohol abuse. The RSAT Unit/Program operates on
principles that are related to healthy living.

I am aware if I choose to leave, I will not be subject to disciplinary action and may be required to
stay an additional two (2) weeks on the unit prior to being released from this contract.

I also agree to waive my transfer eligibility to a less secure Division of Corrections and
Rehabilitation facility for a period of 12 months effective on _____.
(Date)

I understand that I may be required to move to a less secure Division of Corrections and
Rehabilitation facility based on space availability in another RSAT unit.

Inmate Signature/OID#

Date

Staff Signature

Date

West Virginia Division of Corrections and Rehabilitation
Residential Substance Abuse Treatment Unit

RECOMMENDATION TO REMOVE OFFENDER WITH CONTINGENT PAROLE

Offender's Name: _____ OID#: _____

Start Date: _____ Current Phase: _____

Reason for Removals:

Please see attached documentation

RSAT Unit Manager Signature: _____ Date: _____

Superintendent/designee Signature: _____ Date: _____

☐ Approved ☐ Denied

Director of Offender Services/Designee Signature Date

WV Division of Corrections & Rehabilitation Recovery Services Pre-Release Screening

OFFENDER INFORMATION

Name:			OID #:		
Date of birth:		MDD Date:		PED Date:	
Release State:			Release County:		

RECOVERY COACH SERVICES

Are you interested in receiving Recovery Coach Services?		
Designated Recovery Coach:		
Phone:		
Address:		
City:	State:	ZIP Code:

MEDICATIONS FOR OPIOID USE DISORDER

Are you interested in the Medications for Opioid Use Disorder (MOUD) program?		
Facility Name:		
Phone:		
Address:		
City:	State:	ZIP Code:

ALCOHOLICS/NARCOTICS ANONYMOUS MEETINGS

Are you interested in attending Alcoholics/Narcotics Anonymous meetings in the community?		
Nearest meeting location name:		
Phone:		
Address:		
City:	State:	ZIP Code:

*Provide the offender with a list of all meetings in their area.

WV Division of Corrections & Rehabilitation Recovery Services Pre-Release Screening

CELEBRATE RECOVERY MEETINGS

Are you interested in attending Celebrate Recovery meetings in the community?

Nearest meeting location name:

Phone:

Address:

City:

State:

Zip Code:

*Provide the offender with a list of all Celebrate Recovery meetings in their area.

SUBSTANCE ABUSE SUPPORT/COUNSELING LOCATIONS

Do you wish to participate in substance abuse counseling upon your release?

Nearest Substance Abuse Treatment Facility:

Phone:

Address:

City:

State:

Zip Code:

RESOURCES

Celebrate Recovery

<https://www.celebraterecovery.com/>

Vivitrol

<https://www.vivitrol.com/>

Help 4 WV

1-844-HELP4WV

<https://www.help4wv.com/>

Signature of Offender:

Date

Signature of SAT:

Date

(Facility Letterhead)

TO: West Virginia Parole Board

FROM:

DATE:

RE: Participation in the RSAT Program

(Offender's Name and OID #) entered the Residential Substance Abuse Treatment (RSAT) Program on date at facility name and withdrew/completed on date at facility name. During offender's name time in the RSAT program, he/she served as the name and served on the name crew.

While in the community's name Unit, offender's name is consistent in attending groups and carrying out his/her responsibilities in the Community. When participating in groups she/he actively participates.

Some of his/her strengths are fill in information. When doing a job, he/she gives/does fill in information.

While in the community's name Unit, offender's name stepped up and did what was asked of her/him. Name does well in a structured environment. He/she does well under positive guidance.

Offender's name is a phase number in the RSAT program. He/she has an overall good attitude and openly expresses a desire and need to change. He/she needs to continue to attend aftercare treatment.

This is not a recommendation, but merely a report on program participation.

RSAT Unit: Residential Facilities Monthly Reporting Form *(Due by 10th of each month)*

Facility: _____ Month: _____ Year: _____

Amount of Services

- 1) Number of RSAT beds available on the unit: _____
- 2) Number of RSAT residents on the unit: _____
- 3) Number of new beds added on the unit this month: _____
- 4) Number of offenders entering residential treatment during this reporting period: _____
- 5) Average length of stay: _____ *(Average number of months it takes offender to complete program)*
- 6) Number of RSAT offenders leaving the unit during this month for:
 - a) Parole: _____
 - b) Discharge: _____
 - c) Transfer to 1/5 or Work Release _____
 - d) Suspended for Drug & Alcohol Use/Possession _____
 - e) Suspended for any other disciplinary behaviors _____
 - f) Quit the program _____
 - g) Refused to enroll _____
 - h) Elders Removed _____

TOTAL NUMBER OF RSAT OFFENDERS WHO LEFT THE UNIT: _____*(Attach Name and Reason for suspension or removals on additional page)***Residential Treatment Success**

- 1) Total number of RSAT offenders who successfully completed this month: _____
- 2) Total number of RSAT offenders who receive MOUD: _____ *(List name and form of MOUD on 2nd page)*

Timeframes

- 1) Suspended @ 0-3 months: _____
- 2) Suspended @ 4-6 months: _____
- 3) Suspended @ 7-9 months: _____
- 4) Suspended @ 10 months + _____
- 5) Quit @ 0-3 months: _____
- 6) Quit @ 4-6 months: _____
- 7) Quit @ 7-9 months: _____
- 8) Quit @ 10+ months: _____

Recidivism and Drug Use

- 1) Total number of urinalyses tests administered on unit this month: _____
- 2) Total number of RSAT offenders administered a urinalysis this month: _____
- 3) Total number of RSAT offenders with positive urinalysis this month: _____
- 4) Total number of RSAT offenders with negative urinalysis this month: _____
- 5) Total number of RSAT offenders administered Alco-Sensor testing this month: _____

Unit Manager/Designee Signature _____

Date _____

Residential Facilities Monthly Reporting Form - Continued
(Complete for MOUD, Suspensions, and Quit)

Facility: _____ Month: _____ Year: _____

Name/OID#/Type of MOUD	Time in program in months:
1.	
2.	
3.	
4.	
5.	
6.	
7.	
8.	
9.	
10.	
Name/OID#/Reason for Suspension	Time in program in months:
1.	
2.	
3.	
4.	
5.	
Name/OID#/Reason for Quitting the Program	Time in program in months:
1.	
2.	
3.	
4.	
5.	

Unit Manager/Designee Signature

Date